

B6J (Official Form 6J) (12/07)

IN RE Troise, Joseph L.

Case No. 10-51590

Debtor(s)

(If known)

**AMENDED SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☒ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>2,000.00</u>
a. Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
b. Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
2. Utilities:		
a. Electricity and heating fuel	\$	<u>355.00</u>
b. Water and sewer	\$	<u>70.00</u>
c. Telephone	\$	<u>40.00</u>
d. Other <b>See Schedule Attached</b>	\$	<u>274.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>50.00</u>
4. Food	\$	<u>500.00</u>
5. Clothing	\$	<u>50.00</u>
6. Laundry and dry cleaning	\$	<u>50.00</u>
7. Medical and dental expenses	\$	<u>200.00</u>
8. Transportation (not including car payments)	\$	<u>500.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>92.00</u>
10. Charitable contributions	\$	<u>20.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>50.00</u>
b. Life	\$	<u>150.00</u>
c. Health	\$	
d. Auto	\$	<u>100.00</u>
e. Other	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) <b>Personal Property Tax</b>	\$	<u>20.00</u>
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>355.60</u>
b. Other	\$	
14. Alimony, maintenance, and support paid to others	\$	<u>3,858.74</u>
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other <b>See Schedule Attached</b>	\$	<u>593.00</u>
	\$	
	\$	

**18. AVERAGE MONTHLY EXPENSES** (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$	<u>9,328.34</u>
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19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

Debtor and Spouse in process of divorce which is not yet final. Child support, spousal support, and division of debt/property not yet complete and subject to change.

Attorney fees for continuing representation in divorce and business dissolution. Expect total of approximately \$15,000 in fees.

Medical/Dental expenses reflect costs for Debtor and half of co-pays for children.

Transportation expenses of \$500. Debtor has medical practice that is out of three different offices in Roanoke and Lexington.

Food expense reflects costs of meals eaten in hospital when on duty or on call, and three children on visitation.

Phone and cell phone expenses reflect requirement to be "on call" for medical duties.

\$92 for Clubs/REcreation is for YMCA membership. As a result of protracted divorce proceedings, closing down practice, and bankruptcy, Debtor has been diagnosed with hypertension and given doctor's orders to establish and execute a regular and frequent exercise program.

**20. STATEMENT OF MONTHLY NET INCOME**

a. Average monthly income from Line 15 of Schedule I	\$	<u>10,055.68</u>
b. Average monthly expenses from Line 18 above	\$	<u>9,328.34</u>
c. Monthly net income (a. minus b.)	\$	<u>727.34</u>

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Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

**SPOUSE**

1. Rent or home mortgage payment (include lot rented for mobile home) \$ \_\_\_\_\_
  - a. Are real estate taxes included? Yes \_\_\_\_ No ☒
  - b. Is property insurance included? Yes \_\_\_\_ No ☒
2. Utilities:
  - a. Electricity and heating fuel \$ \_\_\_\_\_
  - b. Water and sewer \$ \_\_\_\_\_
  - c. Telephone \$ \_\_\_\_\_
  - d. Other \$ \_\_\_\_\_
3. Home maintenance (repairs and upkeep) \$ \_\_\_\_\_
4. Food \$ \_\_\_\_\_
5. Clothing \$ \_\_\_\_\_
6. Laundry and dry cleaning \$ \_\_\_\_\_
7. Medical and dental expenses \$ \_\_\_\_\_
8. Transportation (not including car payments) \$ \_\_\_\_\_
9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ \_\_\_\_\_
10. Charitable contributions \$ \_\_\_\_\_
11. Insurance (not deducted from wages or included in home mortgage payments)
  - a. Homeowner's or renter's \$ \_\_\_\_\_
  - b. Life \$ \_\_\_\_\_
  - c. Health \$ \_\_\_\_\_
  - d. Auto \$ \_\_\_\_\_
  - e. Other \$ \_\_\_\_\_
12. Taxes (not deducted from wages or included in home mortgage payments)
 

(Specify) \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)
  - a. Auto \$ \_\_\_\_\_
  - b. Other \$ \_\_\_\_\_
14. Alimony, maintenance, and support paid to others \$ \_\_\_\_\_
15. Payments for support of additional dependents not living at your home \$ \_\_\_\_\_
16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ \_\_\_\_\_
17. Other \$ \_\_\_\_\_

**18. AVERAGE MONTHLY EXPENSES** (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$ \_\_\_\_\_

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

**Spouse maintains a separate household. Debtor provides court ordered support but all expenses and income are separate.**

**20. STATEMENT OF MONTHLY NET INCOME**

- a. Average monthly income from Line 15 of Schedule I \$ **0.00**
- b. Average monthly expenses from Line 18 above \$ **0.00**
- c. Monthly net income (a. minus b.) \$ **0.00**

**IN RE Troise, Joseph L.**

Case No. **10-51590**

Debtor(s)

**AMENDED SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**  
**Continuation Sheet - Page 1 of 1**

Other Utilities	
<b>Cell Phone</b>	<b>114.00</b>
<b>Internet</b>	<b>40.00</b>
<b>Cable</b>	<b>110.00</b>
<b>Garbage</b>	<b>10.00</b>
Other Expenses	
<b>Personal Care</b>	<b>50.00</b>
<b>Attorney Fees</b>	<b>250.00</b>
<b>Accounting</b>	<b>40.00</b>
<b>Gifts For Children</b>	<b>50.00</b>
<b>Home Security Alarm</b>	<b>70.00</b>
<b>Pet Supplies - Food/Vet/Grooming</b>	<b>25.00</b>
<b>Eyeglasses</b>	<b>58.00</b>
<b>Professional Continuing Medical Education</b>	<b>50.00</b>